PATENT APPLICATION FEE DETERMINATION RECORD

Application or Docket Number

Effective November 10, 1998 // // 3/658												
CLAIMS AS FILED - PART I (Column 1) (Column 2)							SMA TYP		ENTITY	OR	OTHER SMALL	
FOR		N	NUMBER FILED		NUMBER	NUMBER EXTRA		E	FEE]	RATE	FEE
BA	SIC FEE					16.7			380.00	OR		760.00
TC	TAL CLAIMS			minus	20≔ *		X\$ 9	=		OR	X\$18=	
INE	DEPENDENT C	LAIMS		minus	3 = *		X39	=		OR	X78=	
MULTIPLE DEPENDENT CLAIM PRESENT							+130	_		1	+260=	
* 11	* If the difference in column 1 is less than zero, enter "0" in column 2									OR		
CLAIMS AS AMENDED - PART II							TOTA	\L	<u> </u>	LOH	OTHER	TUAN
(Column 1) (Column 2) (Column 3)							SMA	LL E	ENTITY	OR	SMALL	
AMENDMENT A		CLAIN REMAIN AFTE AMEND	VING ER		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RAT	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
N N	Total	* 14		Minus	** 20	= 0	X\$ 9	=		OR	X\$18≂	
AME	Independent	* /		Minus	*** 3	=0	X39:	_		OR	X78≃	
<u> </u>	FIRST PRESE	NTATION	OF MU	LTIPLE DEF	PENDENT CLAIM		+130	_		OB	+260=	
							TO				TOTAL ADDIT. FEE	
		(Colum	nn 1)		(Column 2)	(Column 3)	ADDIT. F	ee s			ADDIT. FEE	_
AMENDMENT B		CLAIN REMAIN AFTE AMENDI	MS NING R		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATI		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
Š	Total	*		Minus	**	= `	X\$ 9	=	-	OR	X\$18=	
AME	Independent	<u> </u> *		Minus	***	=	X39=			OR	X78=	
H	FIRST PRESE	NTATION	OF MU	LTIPLE DEF	PENDENT CLAIM		+130	-		OR	+260=	
	Ĉ						TOT ADDIT, F			OR	TOTAL ADDIT, FEE	
		(Colum			(Column 2)	(Column 3)						,
AMENDMENT C		CLAIN REMAIN AFTE AMENDI	ING R		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NON	Total	*		Minus	**	=	X\$ 9:			OR	X\$18=	
AME	Independent	*		Minus	***	=	X39=	1		OR	X78=	
	FIRST PRESE	NEATION	OF MU	LIIPLE DEF	PENDENT CLAIM		+130:	_			+260=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." **TOTAL										OR	+200≡ TOTAL	
***	If the "Highest Nu	mber Previo	ously Pai	id For" IN THE	S SPACE is less tha	in 3, enter "3."	ADDIT. F	EE L			ADDIT. FEE	L
	rne "Highest Num	nber Previou	ısıy Paid	For" (Total or	Independent) is the	highest number	found in the	app	ropriate box	(in col	umn 1.	

FORM PTO-875